

Provider Bulletin

These bulletins are how we communicate procedures, reminders and other information to our valued Magellan Complete Care providers. Please take the time to read the information and share with your colleagues and staff. You can also find this information on www.MCCofFL.com.

COVID-19 vaccine update

Magellan Complete Care of Florida (MCC of FL) is committed to working with members and providers to ensure eligible members are receiving their COVID-19 vaccinations. The purpose of this communication is to advise providers of the billing requirements for COVID-19 vaccine administration.

The following updates are effective as of 03/15/21:

- Florida Medicaid covers the COVID-19 vaccine for all Medicaid recipients who have full or limited Medicaid benefits.
- Florida Medicaid will not reimburse the COVID-19 vaccine administration for recipients with:
 - Medicare
 - Commercial insurance

Prior authorization and copays are not required for obtaining or administering the COVID-19 vaccine.

Eligible providers and requirements:

Florida Medicaid will reimburse the following providers, regardless of network status, for the administration of the COVID-19 vaccine for any place of service:

- Physicians and physician extenders including those functioning in a County Health Department, Federally Qualified Health Center or Rural Health Clinic.
- Pharmacies for COVID-19 vaccine administration rendered by pharmacists.

The COVID-19 Vaccination Program Interim Playbook by the Centers for Disease Control and Prevention (CDC) requires providers who are administering COVID-19 vaccinations to enroll in the federal COVID-19 Vaccination Program.

Fee-for-Service Billing & Reimbursement (Effective for Dates of Service starting 3/15/21)

The following reimbursement information is specific to recipients in the fee-for-service delivery system. Florida Medicaid providers administering COVID-19 vaccines to Florida Medicaid recipients are required to submit claims with the specific vaccine product Current Procedural Terminology (CPT), its corresponding National Drug Code (NDC) and the specific vaccine product administration CPT code in

order to receive reimbursement for administration. The manufacturer specific products, NDC and their dose-specific administration code(s) must be submitted for each COVID-19 vaccine dose administered on the claim form.

Billing Code	NDC	CPT Description	Labeler Name	Physician Rate	Extender Rate
91300	59267100001 59267100002 59267100003	SARSCOV2 VAC 30MCG/0.3ML IM	Pfizer	\$ -	\$ -
0001A		ADM SARSCOV2 30MCG/0.3ML 1ST	Pfizer	\$ 40.00	\$ 32.00
0002A		ADM SARSCOV2 30MCG/0.3ML 2ND	Pfizer	\$ 40.00	\$ 32.00
91301	80777027310 80777027399	SARSCOV2 VAC 100MCG/0.5ML IM	Moderna	\$ -	\$ -
0011A		ADM SARSCOV2 100MCG/0.5ML 1ST	Moderna	\$ 40.00	\$ 32.00
0012A		ADM SARSCOV2 100MCG/0.5ML 2ND	Moderna	\$ 40.00	\$ 32.00
91303	59676058005	SARSCOV2 VAC AD26 .5ML IM	Johnson & Johnson (Janssen)	\$ -	\$ -
0031A		ADM SARSCOV2 VAC AD26 .5ML	Johnson & Johnson (Janssen)	\$ 40.00	\$ 32.00

Florida Medicaid will not reimburse for the vaccine product, it is available at no cost through [Operation Warp Speed](#).

Federally Qualified Health Centers, Rural Health Clinics and County Health Departments will be reimbursed outside of the encounter rate and receive the applicable Physician and Physician Extender rates for COVID-19 vaccine administration.

Pharmacy claims submitted for COVID-19 vaccine administration reimbursement must identify the administering pharmacist by Florida pharmacist license number (i.e., PSXXXXX), submitted as the prescriber ID in the National Council for Prescription Drug Programs Online database (NCPDP) field 411-DB.

Pharmacist administered COVID-19 vaccines receive Physician Extender rates and require the following submission clarification codes (SCC) be entered in NCPDP field 420-DK:

- *SCC = 2 (indicates administration of the initial dose)*
- *SCC = 6 (indicates final/single dose administration)*

If you have any questions, please call us at 1-800-327-8613.